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PTO/SB/81 (09-04)

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/540,590
Filing Date	June 24, 2005
First Named Inventor	Martin Thompson
Title	Leak Locator
Art Unit	
Examiner Name	
Attorney Docket Number	692P001

I hereby appoint:

☒ Practitioners associated with the Customer Number:

42754

OR

☒ Practitioner(s) named below:

Name	Registration Number
Kevin S. Lemack	32,579
Robert C. Frame	54,104
Henry C. Nields	17,029

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Nields & Lemack		
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	X/N M Thompson	Date	21/10/05
Name	Martin Thompson	Telephone	44 1223 355990
Title and Company	M.D Mecon Ltd		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>x IN M. Francis Harper</i>	Date	21 st Oct 05
Name	Martin Francis Lucien Harper	Telephone	441223 355990
Title and Company	Tech. Dir. Mecon Ltd		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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